	neral report and committee to update information	information, must be	signed and sub	omitted along with other	er detailed forms.
1. Committee Infor	mation				
a. Full Name Committee to Elect	Chas Post				c. ID Number
Committee to Elect	Chas Post				6GLJ62
	ude City, State and Zip Code)				d. Date Filed
PO Box 1756, Sanfo	ord, NC 27331				7/17/13
					e. Phone Number
					919-353-2225
2. Report Year	3. Period Start Date (mm/	dd/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer Full N	Vame
2013	04/01/13	06.	/30/13	William Manon Ha	rris
6. Type of Committ	ee (Check One)	9. Type of Report	(check or	nly one type of report f	rom one category)
Candidate Campa		Municipal	State/C		Referendum
PAC	Referendum	Organizationa		Organizational	Organizational
Independent	Joint Fundraiser	Thirty-five day		Quarterly	Pre-referendum
Expenditure		I I I I I I I I I I I I I I I I I I I	,	Quarterry	Tre-referendum
Legal Expense Fu		Pre-primary		First	Final
7. Type of Fund "Booster Fund"	(if applicable, check one)	Pre-election		Second	Supplemental Final
Building Fund		Pre-runoff	1	Third	Annual
Dunding rund		Semi-annual	IH	Fourth	Special
		Mid Year	r	Semi-annual	
Other:		Year End	i 🗆	Mid Year	10. Special Report Name
_		Final		Year End	
8. Number of Funda	raisers this Report	Special		Final	
	A	1		Special	
11. Account Inform	ation		11. Account	Information	
a. Financial Institution F	'ull Name		a. Financial Inst	titution Full Name	
Vantage South Bank			PayPal		
b. Purpose	c. Account Code	AND STREET WAY OF THE PARTY OF	b. Purpose		c. Account Code
General			Online		2
Campaign		L	Campaign		
Fund	d. Period Begin Balanc	e	Contribution	CEIVED	d. Period Begin Balance
	\$ 0.00		F I Loren		\$ 0.00
CERTIFICATION				JL 1 7 2013	
I certify that the Conthe NC General Statu		ommingled with prob	nibited or other	non-disclosed funds. I	& 22D-22M of Chapter 163 of further certify that this report
William M		and the second s	Ellem W		7/17/2017
	Printed Name of Signer		ignature of Appoin		Date
FOR OFFICE USE O	NLY /		10		
Date Received:	7/11/13	Employee:	N		elivery Method Normal Mail
Date Postmarked	l:	Employee:			Registered Mail Hand Delivered
Date Scanned:		Employee:			Electronically Filed Signer has not received
Date Data Entere	ed:	Employee:	\		mandatory training
Please Note: This		mend committee information of books information			s, treasurer, assistant treasurer,
	You must amend the State				e changes.

Disclosure Report Cover

Amendment

No

CRO-1000 NC State Board of Elections August 2008

Amendment

Yes

No

Detailed Summary
Use this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if annihilation)

1. Committee Full Name (and Fund if applicable)	2. Type of Report		3. ID Number
Committee to Elect Chas Post	Semi-annual Mid-Year		6GLJ62
Start of Election Cycle: January 1,	2010	Total this	Total this
	AU I U	Reporting Period \$ 0	Election Cycle \$ 0
4) Cash on Hand at Start RECEIPTS		3 0	5
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 11,999.15	\$ 11,999.15
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizati	ions (CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11a)	lc, 11d and 11e)	\$ 11,999.15	\$ 11,999.15
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 273.77	\$ 273.77
13b) Contributions to Candidates/Political Commi	ttees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 400.00	\$ 400.00
17) In-Kind Contributions	(CRO-1510)	\$ 689,15	\$ 689.15
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	15, 16 and 17)	\$ 1,362.92	\$ 1,362.92
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	htract line 18)	\$ 10,636.23	\$ 10,636.23
ADDITIONAL INFORMATION		Γ.	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	10 10 10 10 10 10 10 10 10 10 10 10 10 1
21) Outstanding Loans (incl. ones from other campaig		\$	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

		m Individuals	0.54	Pg			Yes	□ No
		ividual contributions (and Fund if applica		or contributions und	der \$50 if form CR	2. ID Nu		
			DIC)			2. 1D Nu		
Committ	ee to Elect Chas P	ost					6GLJ62	
	ibutor Informati				emove			
1	ne, Mailing Address	& Phone		b. Job Title/Profession	1	d. Commer	nts	
	city, state, & zip)			Attorney				
	Carter Post	ford NC 27220		a Employed Nome/6	Specific Field	-		
910-420-	d Ashley Dr, Sant	101u, NC 27550		c. Employer's Name/S Van Camp, Meach	+			
710-420-	1450			Newman	adii C	e. Election	Sum to Date	
						\$	400.00	10 001
f. Prior	g. Account Code	h. Form of Payment	i. In-I	 Kind Description	j. Date (mm/dd/y	yyy)	k. Amount	
	1	Check			04/25/2		\$	400.00
П							\$	
							\$	
2 Control	ibutor Informatio			Add Re	emove		Ι Ψ	
	ne, Mailing Address	the second secon		b. Job Title/Profession		d. Commen	nto	1
1	city, state, & zip)	& Filone		Attorney		u. Commen		
Kristy G								
	one Trail Rd, Sanf	ford, NC 27330		c. Employer's Name/S	Specific Field	1		
(919) 775				Doster, Post, Silve	erman,		A The Allegan	
				Foushee & Post, I	PA	e. Election	Sum to Date	
						\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	Check			05/02/2	.013	\$	250.00
							\$	
							\$	
3. Contri	butor Informatio	on		Add 🗌 Re	emove			
a. Full Nan	ne, Mailing Address	& Phone		b. Job Title/Profession	1	d. Commen	nts	
	city, state, & zip)			Attorney				
Norman		NG 05220				-		
(919) 776	nnon Dr, Sanford	, NC 27330		c. Employer's Name/S Doster, Post, Silve		-		
(919) //(5-7003			Foushee & Post, F		e. Election	Sum to Date	
				Tousing & Tost, I	**	\$	1,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/yy	/ yy)	k. Amount	
	1	Check		In visit	05/02/2		\$	500.00
	1	Check			05/29/2	2013	\$	500.00
							\$	
4. Total	only this Pag	e				\$		1,650.00
5. Total	of ALL CRO	-1210 Pages				•		11 000 15

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Amendment

		m Individuals ividual contributions	over \$5	Pg			Yes	□ No
		(and Fund if applica	THE RESERVE AND PERSONS ASSESSMENT	of contributions and	lei \$30 ii ioiiii CR	2. ID Nu		
	ee to Elect Chas P		ioic)			Z. ID IN	6GLJ62	
3 Contr	ibutor Informatio	nn .	П	Add Re	move			
	me, Mailing Address			b. Job Title/Profession		d. Commer	nte .	
	city, state, & zip)	a i none		Attorney		u. Commici	113	
Amber D				- Attorney				
	ldstone Dr, Sanfor	d. NC 27330		c. Employer's Name/S	pecific Field	1		
				Ellis Law Office		1		
						e. Election	Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	 Kind Description	j. Date (mm/dd/yy	(YYY)	k. Amount	
	1	Check			05/16/2	013	\$	100.00
							\$	
							\$	
3. Contr	ibutor Informatio	on		Add Rei	move			
a. Full Nar	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Commer	ıts	
	city, state, & zip)	a wasana wa watana		Orthodontist				
Lynn H S								
	rmly Circle, Sanfo	rd, NC 27330		c. Employer's Name/Sp				
(919) 776	5-8083			Smith & Smith Or	thodontics			
						e. Election	Sum to Date	
						\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	ind Description	j. Date (mm/dd/yy	(yy)	k. Amount	
	1	Check			05/16/2	013	\$	250.00
							\$	
							\$	
3. Contr	ibutor Informatio	n		Add Rei	nove			
a. Full Nar	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Commen	its	
	city, state, & zip)			Executive Director				350007-1500.07
Janet P H	A STATE OF THE STA							
	d Ashley Dr, Sanf	ord, NC 27330		c. Employer's Name/Sp				
(919) 776	5-0669			United Way of Lee	County			
						e. Election	Sum to Date	
	×					\$	1,012.45	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check			05/16/2	013	\$	500.00
			Cate	ring	06/10/2	2013	\$	420.88
			Cate	ring	06/10/2	2013	\$	91.57
4 Tota	only this Pag	ρ	Lanto a			\$		1,362.45

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

11,999.15

\$

		n Individuals vidual contributions of	over \$50	or contrib	Pg utions unde		of n CRO 1205		ent es 🗌 No
1. Comm	nittee Full Name	and Fund if applica	ble)				2. ID	Number	
Committ	ee to Elect Chas P	ost						6GLJ62	
	ibutor Informatio			Add [Ren	nove			
	ne, Mailing Address &	& Phone			e/Profession		d. Co	mments	
Ron Perk	city, state, & zip)			Attorney	Y				
1000 CO	d Ashley Dr, Sanf	ord, NC 27330			er's Name/Spe on Mediatio		a Flo	ction Sum to Date	
							3	\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Descript	ion	j. Date (mm.	/dd/yyyy)	k. Amour	ıt
	1	Check				05,	/23/2013	\$	200.00
								\$	prop. Britishers and Auto.
								\$	
3. Contri	ibutor Informatio	n		Add [Rem	iove			
	ne, Mailing Address &	k Phone			e/Profession		d, Cor	mments	
	wornom			Presiden	t				
25/2012/04/2014 (2005)	nberlin Rd, Sanfor	d. NC 27330		c. Employe	er's Name/Spe	ecific Field			
(919) 776					Investmen				
							e. Elec	ction Sum to Date	
							\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Lind Descript	ion	j. Date (mm/	/dd/yyyy)	k. Amoun	t
	1	Check				05/	/23/2013	\$	250.00
								\$	
					SEASON HIGH IN THE SEASON			\$	
3. Contri	ibutor Informatio	n		Add [Ren	iove			
	ne, Mailing Address &	2 Phone			e/Profession		d. Cor	nments	
	city, state, & zip)			Attorney	T .				
Gregory S	ornhill Club Drive,	Charlotte NC		c. Employe	er's Name/Spe	ecific Field			
28277	, , , , , , , , , , , , , , , , , , ,	Charotto, 110			Scott, PLL				
919-522-	3828						e. Elec	ction Sum to Date	
							\$	25.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Lind Descript	ion	j. Date (mm/	/dd/yyyy)	k. Amoun	t
	2	PayPal				06/	/06/2013	\$	25.00
								\$	

CRO-1210 NC State Board of Elections April 2007

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

\$

475.00

11,999.15

\$

\$

		n Individuals vidual contributions	over \$50	or contrib	Pg outions unde			Amendme _	
	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	and Fund if applica		The second			2. ID Nu		
Committe	ee to Elect Chas Po	ost						6GLJ62	
3. Contri	ibutor Informatio	n		Add [Ren	iove			
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title	e/Profession		d. Commen	its	
(include	city, state, & zip)			Product	Manager				
William 1									
The second of the second of	Ilington Dr, Sanfor	rd, NC 27330		c. Employe	er's Name/Spe	ecific Field			
(919) 353	5-2225			BB&T					
							e. Election	Sum to Date	
							\$	171.70	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Descript	tion	j. Date (mm/dd/yy	уу)	k. Amount	
	2	PayPa1				06/10/2	013	\$	10.00
			Web	site		04/30/2	2013	\$	36.06
			Web	site		05/04/2	2013	\$	47.00
3. Contri	butor Informatio	n		Add [Rem	iove			
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title	e/Profession		d. Commen	ts	
	city, state, & zip)			Product	Manager				
William l									
	llington Dr, Sanfor	rd, NC 27330			er's Name/Spe	cific Field			
(919) 353	-2225			BB&T					
							e. Election	Sum to Date	
							\$	171.70	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	and Descript	tion	j. Date (mm/dd/yy	уу)	k. Amount	
			Shirt	& Koozies	S	05/21/20	013	\$	70.00
			Shirt	& Koozies	S	05/24/2	2013	\$	8.64
	1	Check			000000000000000000000000000000000000000	04/25/2	2013	\$	400.00
3. Contri	butor Informatio	n		Add [Rem	ove			
a. Full Nan	ne, Mailing Address &	2 Phone		b. Job Title	e/Profession		d. Commen	ts	

3. Cont	ributor Informati	on		Add R	emove			
	me, Mailing Address	& Phone	AL TOPOLOGICA	b. Job Title/Profession	n	d. Commer	nts	
	e city, state, & zip)			Product Manager				
	M Harris	1 170						
(919) 35	ellington Dr, Sanfo	ord, NC 27330		c. Employer's Name/	Specific Field			
(919) 33	53-2223			DD&1		e. Election	Sum to Date	
						\$	171.70	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/y	ууу)	k. Amoun	t
			Shir	t & Koozies	05/21/2	2013	\$	70.0
			Shir	t & Koozies	05/24/	2013	\$	8.0
	1	Check			04/25/	2013	\$	400.0
3. Conti	ributor Informati	on		Add R	emove			
	me, Mailing Address	& Phone		b. Job Title/Professio		d. Commer	nts	
	e city, state, & zip)	WAR TO THE REST OF THE TOTAL TO THE		Manager, Public	Health			
J Craig	Stanley rkspur Dr, Sanford	I NC		c. Employer's Name/	Casific Field	4		
(919) 77		i, NC		Bristol-Myers Sq		-		
(313)	0 3330			2115101 111, 010 04		e. Election	Sum to Date	
						\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	Check			06/10/2	2013	\$	200.0
							\$	
							\$	
						\$		771.
4. Tota	only this Pag	e				-		
	only this Pag					\$	-	11,9

Amendment Contributions from Individuals Pg of No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number Committee to Elect Chas Post 6GLJ62 Add 3. Contributor Information Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments (include city, state, & zip) Realtor Mary Jo Parks PO Box 341, Sanford, NC 27331 c. Employer's Name/Specific Field (919) 775-2162 Forbes Realty e. Election Sum to Date \$ 250.00 j. Date (mm/dd/yyyy) f. Prior g. Account Code h. Form of Payment i. In-Kind Description k. Amount 1 Check 06/10/2013 \$ 250.00 \$ \$ Add Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments Director of Manufacturing (include city, state, & zip) Terry N Russell 1605 Briarcliffe Dr, Sanford, NC 27330 c. Employer's Name/Specific Field

1002 DII	archine Di, Samo	iu, INC 27330		c. Employer s Name	specific riem			
(919) 770	6-8544			Magneti Marelli				
						e. Election	Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/yy	yyy) k. Amount		nt
	1	Check			06/10/2	013	\$	100.00
							\$	
							\$	
3. Contr	ributor Information			Add R	emove			
a. Full Nar	ne, Mailing Address	& Phone		b. Job Title/Professio	d. Comments			
(include	nclude city, state, & zip)			Attorney				
	H Whitaker							
	4477, Sanford, NO	27330		c. Employer's Name/	Specific Field			
(919)776	6-2676			Self				
					e. Election Sum to Date			
						\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-k	Kind Description	j. Date (mm/dd/yy	d/yyyy) k. Am		nt
	1	Check			06/10/2	013	\$	500.00
							\$	
							\$	
4. Tota	l only this Pag	e				\$		850.00
	5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-116))		\$		11,999.15
CRO-121				NC State Board of Elect	ions	- Lucia		April 2007

					Amer	idment
Contributions from Individuals	Pg	6	of	_17_		Yes
	* 6		- 0.			

No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number Committee to Elect Chas Post 6GLJ62 Add Remove 3. Contributor Information b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments Real Estate/Contracting (include city, state, & zip) Jennifer S Brown 7301 Villanow Dr, Sanford, NC 27332 c. Employer's Name/Specific Field RWB, Inc. (919) 774-3147 e. Election Sum to Date \$ 100.00 j. Date (mm/dd/yyyy) f. Prior h. Form of Payment i. In-Kind Description k. Amount g. Account Code 1 Check 06/10/2013 100.00 \$ \$ Add Remove 3. Contributor Information a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments Dentist (include city, state, & zip) J David Fisher, Jr 1630 Crepe Myrtle Dr, Sanford, NC 27330 c. Employer's Name/Specific Field Self (919) 776-0741 e. Election Sum to Date 200.00 i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount f. Prior g. Account Code h. Form of Payment 06/10/2013 \$ 200.00 1 Check \$ \$ Add Remove 3. Contributor Information b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments Retired (include city, state, & zip) Lisa W Foushee c. Employer's Name/Specific Field 363 Pressley Foushee Rd, Sanford, NC Lee County Schools 27330 e. Election Sum to Date 50.00 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount \$ 50.00 1 06/10/2013 Check \$ \$ \$ 350.00 4. Total only this Page 5. Total of ALL CRO-1210 Pages \$ 11,999.15

(This line must be on line 6 of Detailed Summary Page CRO-1100)

		m Individuals	over \$50	or contril	Pg outions unde		17 O 1205 is no	Amendment Yes of used	☐ No
The second second	The second secon	and Fund if applica	THE RESERVE OF THE PERSON				2. ID Nun	Marie Marie Colored	Name of
Committ	ee to Elect Chas P	ost						6GLJ62	
3. Contr	ibutor Informatio	on		Add	Ren	nove			
Harry Committee of the	ne, Mailing Address &	& Phone			le/Profession		d. Comment	ts	
Justin B	city, state, & zip)			Genera	l Contractor				
	rmly Circle, Sanfo	rd NC 27330		c. Employ	er's Name/Sp	ecific Field	-		
(919) 343		14, 110 27330			n Builders				
							e. Election S	um to Date	
							\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Descrip	tion	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check				06/10/2	013	\$	200.00
								\$	
								\$	
3. Contr	ibutor Informatio	n		Add	Ren	nove			
	ne, Mailing Address &	& Phone			le/Profession		d. Comment	s	
	city, state, & zip) Welborn			Partner					
	s Cole Rd, Sanford	1 NC 27332		c. Employ	er's Name/Sp	ecific Field	1		
(919) 774		, 110 21332				, Joyce & Co,			
							e. Election S	um to Date	
							\$	200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Descrip	tion	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check				06/10/2	013	\$	200.00
							William William	\$	
								\$	
3. Contri	ibutor Informatio	n		Add	Ren	iove			
	ne, Mailing Address &	& Phone			le/Profession		d. Comment	S	
(include Matthew	city, state, & zip)			Constru	iction Service	ces Manager			
Contraction assessment and Contraction of	ches Way, Sanford	1 NC 27330		c. Employ	er's Name/Sp	ecific Field	1		
919-353-	1500	, 110 27330			Contractor				
							e. Election S	um to Date	
							\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Cind Descrip	tion	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check				06/10/2	013	\$	100.00
								\$	
				ocean na i Car ollo Sun II II I		100000000000000000000000000000000000000		\$	

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line must be on line 6 of Detailed Summary Page CRO-1100)

\$

\$

500.00

11,999.15

Contributions from Individuals Pg 8 of 17 Yes No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Comm	ittee Full Name	(and Fund if applica	ble)			2. ID Nun	nber	
Committe	ee to Elect Chas P	ost					6GLJ62	
3. Contri	ibutor Informatio	on		Add 🗌 Rei	move			
a. Full Nan	ne, Mailing Address	& Phone		b. Job Title/Profession		d. Commen	ts	
	city, state, & zip)		·	Attorney				
Robert T					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1		
	2041, Sanford, NC	27331		c. Employer's Name/Sp		1		
(919) 352	2-3033			Wilson & Reives A				
				Law		e. Election S	Sum to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Zind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check			06/10/2	013	\$	100.00
							\$	
		<u> </u>					\$	
3. Contri	ibutor Informatio	on		Add Rei	move			
a. Full Nan	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comment	ts	
	city, state, & zip)			Attorney				
	Γ Wilson, Jr					-		
	1653, Sanford, NC	27331		c. Employer's Name/Sp				
(919) 352	2-3033			Wilson & Reives	Attorneys at	771 11 6		
				Law		e. Election S	oum to Date	
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Lind Description	j. Date (mm/dd/yy	уу)	k. Amount	
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(include	city, state, & zip)			Banker				30
Douglas l	450							
	pe Myrtle Dr, San	ford, NC 27330		c. Employer's Name/Sp				
(919) 774	1-1511			Vantage South Bar	nk			
						e. Election S	um to Date	1200
						\$	100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	уу)	k. Amount	
	1	Check			06/10/20	013	\$	100.00
						0.55	\$	***************************************
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4. Total	l only this Pag	e				\$		300.00
5. Total	of ALL CRO	-1210 Pages				\$		11,999.15
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		m Individuals ividual contributions	over \$5	P _i) or contributions un	0	17 20 1205 is n	Amendment Yes	☐ No
		(and Fund if applica				2. ID Nu	The state of the s	
Committ	ee to Elect Chas P	ost					6GLJ62	
3. Contr	ibutor Informatio	on		Add 🗌 Ro	emove			era de la se
a. Full Nar	ne, Mailing Address	& Phone		b. Job Title/Profession	n	d. Commen	ıts	
	city, state, & zip)			Vice President				
Munsey.		0.25222						
(919) 776	ey Rd, Sanford, No	C 2/330		c. Employer's Name/S Heritage Concrete		-		
(919) //(3-8430			Tiernage Concrete	•	e. Election	Sum to Date	
						\$	50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
	1	Check			06/10/2	2013	\$	50.00
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	city, state, & zip)			Attorney				
Jimmy L		27221				-		
(919) 776	309, Sanford, NC 2	2/331		c. Employer's Name/S Love & Love Atte		-		
(313) //(3-2090			Love & Love Att	orneys	e. Election S	Sum to Date	
						\$	500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Cind Description	j. Date (mm/dd/y	yyy)	k. Amount	
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	ne, Mailing Address &	& Phone		b. Job Title/Profession	n	d. Commen	ts	
	city, state, & zip)			Interior Design				
and Application of the Control of th	B Daniel					1		
	okwood Trail, Sar	ford, NC 27330		c. Employer's Name/S	Specific Field	4		
(919) 774	1-9692			Self		a Floation 6	Sum to Date	
0.000						\$	250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-F	Kind Description	j. Date (mm/dd/y	ууу)	k. Amount	
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5. Total of ALL CRO-1210 Pages

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